PART B - FEE(S) TRANSMITTAL

plete and send this form, together was applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

STRUCTIONS: This form should be used for transmitting the ISSUE

ppropriate. All furthe ndicated unless correc maintenance fee notific	r correspondence included below or directed database.	ding the Patent, advance otherwise in Block 1, by	SUE FEE and PUBLICA orders and notification o (a) specifying a new cor	TION FEE (if red f maintenance fees respondence address	quired). Blocks I through 5 will be mailed to the curre	should be completed where nt correspondence address at parate "FEE ADDRESS" for
23599 MILLEN, WH 2200 CLAREN SUITE 1400	7590 12/ IITE, ZELANO & DON BLVD.	Block I for any change of addres	S) N Fe Pe he	ote: A certificate c ec(s) Transmittal. T apers. Each addition ave its own certifica	of mailing can only be used his certificate cannot be used all paper, such as an assignment te of mailing or transmission.	for domestic mailings of the for any other accompanying tent or formal drawing, must
ARLINGTON,	VA 22201		tra	insmitted to the US	PTO (571) 273-2885, on the	s above, or being facsimile date indicated below.
		,	<u> </u>			(Depositor's name)
						(Signature)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	R	LA TITO DAVIS	(Date)
10/071,248 TITLE OF INVENTION INHIBITORS	02/11/2002 HYDROXY, W-CAR	BOXYARYL SUBSTI	Bernd Riedl FUTED DIPHENYL URE	AS AND DEIVA	ATTORNEY DOCKET NO. BAYER-15 P4 TIVES THEREOF AS RAF	CONFIRMATION NO. 9631 KINASE
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	I m my to a month	•		
nonprovisional	NO	\$1510	PUBLICATION FEE DUE	PREV. PAID ISSU	FEE TOTAL FEE(S) DUE	DATE DUE
EXAMI	NER	ART UNIT	\$300	\$0	\$1810	03/16/2009
DESAI, RITA J		1625	CLASS-SUBCLASS			
1. Change of corresponder CFR 1.363).			546-290000			
Change of correspond Address form PTO/SB/ "Fee Address" indic PTO/SB/47; Rev 03-02 Number is required.	ndence address (or Char 122) attached. ation (or "Fee Address" or more recent) attache	Indication form	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member of litten, White, Zelano registered attorneys or agent) and the names of up to litten, White, Zelano 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
Bayer Pharmace	n 37 CFR 3.11. Complete BEE Buticals Corp	ed below, no assignee cetion of this form is NOT	HE PATENT (print or type data will appear on the pa a substitute for filing an a (B) RESIDENCE: (CITY) West Hay	e) tent. If an assigner ssignment. and STATE OR CO	e is identified below, the do	cument has been filed for
Please check the appropriate	assignee category or ca	ategories (will not be prin	nted on the patent):	Individual 🗶 Con	Oration or other private grow	n antice. Do
Issue Fee Publication Fee (No s Advance Order - # of	mall entity discount per	4b. [mitted)	inted on the patent): Individual Corporation or other private group entity Government Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-340 (enclose an extra copy of this form).			
. Change in Entity Status	(from status indicated a	bove)	o respending to Deposit	Account Number	3402 (enclose an e	extra copy of this form).
a. Applicant claims Store: The Issue Fee and Pu	Iblication Fee (if require	Sec 27 CED 1 22 E	7.			
iterest as shown by the reco	rds of the United States	Patent and Trademark O	rom anyone other than the flice.	applicant; a registe	ENTITY status. See 37 CFR red attorney or agent; or the a	assignee or other party in
Authorized Signature /Richard J. Traverso/					16, 2009	
Typed or printed name	Richard J. T	raverso			30 E0E	
his collection of information application. Confidentialit bentting the completed applis is form and/or suggestions ox 1450, Alexandria, Virgin lexandria, Virginia 22313-1- nder the Paperwork Reducti	n is required by 37 CFR y is governed by 35 U.S y is governed by 35 U.S y is governed for the US for reducing this burden ia 22313-1450. DO NO 450. on Act of 1995, no person is required by the US of the US	1.311. The information is S.C. 122 and 37 CFR 1.1 PTO. Time will vary de to should be sent to the COT SEND FEES OR COIONS are required to responsors.	s required to obtain or reta 4. This collection is estima pending upon the individual hief information Officer, I MPLETED FORMS TO T and to a collection of inform	Registration No. in a benefit by the pated to take 12 min all case. Any comm U.S. Patent and Tra HIS ADDRESS. Si	public which is to file (and by utes to complete, including gents on the amount of time demark Office, U.S. Department of the Commissioner for clays a valid OMB control pure	the USPTO to process) athering, preparing, and you require to complete tent of Commerce, P.O. Patents, P.O. Box 1450,